PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10624678

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
7.	TAL OLAMA		(Column 1) ((Colu	Column 2)		TYPE		OR	SMALL	
TOTAL CLAIMS							R/	ΛTE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	375.00	OR	BASIC FEE	750.00
TC	TAL CHARGEA	BLE CLAIMS	/0 minus 20= *		*		X	9=		OR	X\$18=	
┞	EPENDENT CL		/ minus 3 = *				X	12=		OR	X84=	24
ML	LTIPLE DEPEN	IDENT CLAIM PI	RESENT	ENT			+1			OR	+280=	D-1 -
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2			column 2	<u> </u>	TAL		OR	TOTAL	234
CLAIMS AS AMENDED - PART II										,	OTHER	
(Column 1) (Colum CLAIMS HIGH						·· =/ (00:0::::10)			ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent * Minus FIRST PRESENTATION OF MULTIPLE DEI		***		=	X4	2=		OR	X84=		
<u> </u>	THOTTHESE	NATION OF WIL		ENDENT	CLAIM		+14	10=		OR	+280=	
								OTAL . FEE		OR	TOTAL	
(Column 1) (Column 2) (Column 3)											ADDIT. FEE	
_		CLAIMS		HIGH	EST				ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	RA	TE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	2=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											•
							+14			OR	+280=	
								OTAL FEE		OR	TOTAL ADDIT. FEE	-
		(Column 1) CLAIMS	Leaven and the second	(Colun		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	dent * Minus *** PRESENTATION OF MULTIPLE DEPENDENT		CLAINA	<u> </u>	X4	2=		OR	X84=		
<u> </u>	THE STATE OF MOUTH LE DEFENDENT CLAIM							0=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR I	TOTAL	
***	If the "Highest Nu	mber Previously Pai ber Previously Pai	aid For" IN THI	S SPACE is	s less tha	n 3. enter "3 "	ADDIT	_	propriate box	•	ADDIT. FEE I umn 1.	